

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL CURT CLAWSON- THE OUTSIDER FOR CONGRESS COMMITTEE																																																																																																																																																																																																																			
ADDRESS (number and street) 8951 BONITA BEACH RD STE 525-V2014																																																																																																																																																																																																																			
CITY, STATE, and ZIP CODE BONITA SPRINGS FL 34135																																																																																																																																																																																																																			
2. NAME OF CANDIDATE CURTIS J CLAWSON		3. OFFICE SOUGHT (State and District) House FL 19																																																																																																																																																																																																																	
		4. FEC IDENTIFICATION NUMBER C00554972																																																																																																																																																																																																																	
5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____																																																																																																																																																																																																																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">A. FULL NAME, MAILING ADDRESS AND ZIP CODE</td> <td colspan="2">Name of Employer</td> <td colspan="2">Date (month, day, year)</td> <td colspan="2">Amount</td> </tr> <tr> <td colspan="2">AMBER ANDEL</td> <td colspan="2">COMMUNITY HOME CARE</td> <td colspan="2">06/18/2014</td> <td colspan="2">2500.00</td> </tr> <tr> <td colspan="2">8813 TAMIAMI TRAIL, EAST</td> <td colspan="2">Transaction ID : F6.7051</td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="2">NAPLES FL 34113</td> <td colspan="2">Occupation</td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="2"></td> <td colspan="2">OWNER</td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="2">B. 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FEC FORM 6

(Revised 07/2011)